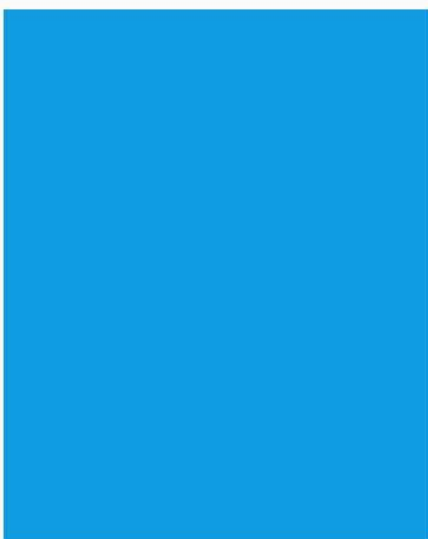
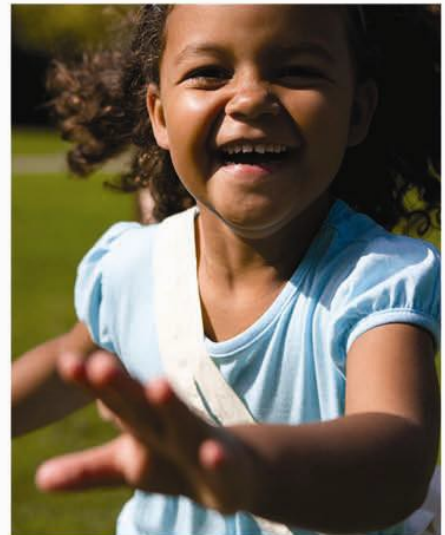


**Clinical Commissioning
Policy Statement: Deep Brain
Stimulation for
Indications Except
Movement Disorders**

April 2013

Reference : NHSCB/D03/PS/c



NHS Commissioning Board Clinical Commissioning Policy Statement: Deep Brain Stimulation for Indications Except Movement Disorders

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**Prepared by the NHS Commissioning Board Clinical Reference Group for
Adult Neurosurgery**

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<p>POLICY STATEMENT:</p> <p>Deep Brain Stimulation for Indications Except Movement Disorders</p>	<p>Policy Ref:</p> <p>NHSCB/D03/PS/c</p>
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Treatment:	Deep Brain Stimulation (DBS)
For the treatment of:	All indications except movement disorders. For example: coma, depression, pain, Tourette's Syndrome.
Background:	<p>Deep brain stimulation is a neurosurgical technique undertaken by neurosurgical units who have a specialised experience in functional neurosurgery.</p> <p>DBS uses implantable electrodes to send high-frequency electrical signals to the deep nuclei in the brain. A pulse generator is surgically implanted under the skin. Batteries in the generator last about 5 years and can be replaced surgically longer life and rechargeable batteries are being developed.</p> <p>DBS is a treatment used in a wide range of indications. For movement disorders (Parkinson's disease, dystonia and tremor) there is some evidence of clinical and cost-effectiveness (see policy ref: NHSCB/D3/1).</p> <p>For other indications there are significant gaps in the evidence and questions that need to be addressed by further research.</p>
Commissioning position:	<p>The level of evidence does not support the routine funding of DBS on the basis of clinical effectiveness for: coma, depression, pain, Tourette's Syndrome</p> <p>Pending further evidence of clinical effectiveness, this commissioning policy will apply to all indication for DBS except the movement disorders outlined in policy ref: NHSCB/D3/1.</p>
Effective from:	1 April 2013
Evidence summary:	In 2008, the South West Specialised Commissioning Group reviewed the evidence for DBS in coma, severe depression,

pain and Tourette's syndrome.

The recommended commissioning position for all of these indications was that the evidence does not support the routine funding of DBS on the basis of clinical effectiveness.

For the indication severe depression an additional recommendation was that funding should only be considered in the context of supporting treatment costs within a multicentre controlled trial with a control group not receiving DBS, where the costs of the study are supported by a third party.

Equality Impact:

The NHS CB has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as enshrined in the Health and Social Care Act 2012. The NHS CB is committed to ensuring equality of access and non-discrimination, irrespective of age, gender, disability (including learning disability), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. In carrying out its functions, the NHS CB will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998. This applies to all activities for which they are responsible, including policy development, review and implementation.

Responsible CRG: Adult Neurosurgery

Date approved by NHSCB Board: April 2013

Policy review date: April 2014

Version: 1

Supersedes: N/A

References

South West Specialised Commissioning Group. DBS commissioning tools, bibliographies and evidence tables. August 2008.